

## Quarterly Totals

### Demographic Reporting Form Positive Alternatives

Date: 1/1/15-3/31/15

Grantee Name: Women's Life Care Center

#### 1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	0	3	18	20	41	18	3

#### 2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
6	13	23	57	4

#### 3. Client Marital Status:

Married	Not Married	Marital Status Unknown
40	7	56

#### 4. Client Race:

Race: White	Race: African Amer.	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race
26	22	0	6	17	32

#### 5. Client Ethnicity:

Race: Unknown	Hispanic Ethnicity: Yes	Hispanic Ethnicity: No
0	30	73

